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MAIL STOP PATENT APPLICATION
COMMISSIONER FOR PATENTS
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KATHY HART GAGNON

UTILITY PATENT APPLICATION TRANSMITTAL

(for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Dear Sir:

Please find enclosed a patent application and papers as follows for:

Inventor(s):

Given Name (first and middle)	Family Name or Surname	Residence
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Satoshi	YAMAMOTO	3-9-7 Misono Moriya-shi, Ibaraki, Japan
Naoki	YONEDA	1-906-306 Takezono Tsukuba-shi, Ibaraki, Japan

Title of the Invention: MACROCYCLIC COMPOUNDS USEFUL AS PHARMACEUTICALS

A) APPLICATION ELEMENTS:

1) ☐ **Fee Transmittal Form** (original and duplicate submitted for fee processing)

2) ☐ **Applicant Claims Small Entity Status** (see 37 CFR §1.27)

a) ☐ Statement Verifying Small Entity Status

3) ☒ **Specification**

TOTAL PAGES: 408

(including 392 pp. description, 15 pp. claims, 1 pg. abstract)

- Descriptive Title of the Invention
- Priority Claim
- Background of the Invention
- Summary of the Invention
- Description of the Certain Preferred Embodiments of the Invention
- Treatment Kits
- Equivalents
- Exemplification
- Claim(s) (15 pp.)
- Abstract of the Invention (1 pg.).

4) ☐ **Drawing(s)** (35 U.S.C. § 113)

TOTAL SHEETS:

a) ☐ Formal Drawings (if checked)

5) ☐ **Oath or Declaration**

TOTAL PAGES:

a) ☐ Newly Executed (original)

b) ☐ Copy from a prior application (37 C.F.R. § 1.63(d))-for
continuation/divisional application

c) ☐ Unexecuted

6) ☐ **Application Data Sheet.** See 37 CFR 1.76.

- 7) ☐ **CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)**
- 8) ☐ **Nucleotide and/or Amino Acid Sequence Submission** (if applicable, all are necessary)
- a) ☐ Computer Readable Form (CRF)
- b) ☐ Specification Sequence Listing on:
- i) ☐ CD-ROM or CR-R (2 copies); or
- ii) ☐ Paper (☐ pages)
- c) ☐ Statements verifying identity of above copies
- d) ☐ Amendment Introducing Sequence Listing

B) ACCOMPANYING APPLICATION PARTS:

- 9) ☐ **Assignment Papers**
- 10) ☐ **37 C.F.R. § 3.73(b) Statement**
- 11) ☐ **Power of Attorney;**
- 12) ☐ **English Translation Document** (if applicable)
- 13) ☐ **Information Disclosure Statement (IDS)/PTO-1449**
- 14) ☐ **Statement Under 37 C.F.R. §§ 1.56, 1.97 and 1.98**
- 15) ☐ **Copies of IDS Citations**
- 16) ☒ **Return Receipt Postcard (MPEP 503)** (specifically itemized)
- 17) ☐ **Certified Copy of Priority Document(s)** (if foreign priority is claimed)
- 18) ☒ **OTHER:** (if applicable, specified below)
- (a) **Appendix A – FDA Approved Oncology Drugs (11 pp.)**

C) FOR CONTINUING APPLICATIONS: (the appropriate box is checked, and certain information is provided below and in a preliminary amendment)

☐ CONTINUATION ☐ DIVISIONAL ☐ CONTINUATION-IN-PART (CIP)

OF PRIOR APPLICATION NO:	
FILED:	
EXAMINER:	
GROUP/ART UNIT:	

FOR CONTINUATION OR DIVISIONAL APPLICATIONS ONLY: THE ENTIRE DISCLOSURE OF THE PRIOR APPLICATION, FROM WHICH AN OATH OR DECLARATION IS SUPPLIED AS DETAILED ABOVE, IS CONSIDERED A PART OF THE DISCLOSURE OF THE ACCOMPANYING CONTINUATION OR DIVISIONAL APPLICATION AND IS HEREBY INCORPORATED BY REFERENCE.

D.) PRIORITY CLAIM(S):

This application claims the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America listed below:

Application Number	Filing Date	Status
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PCT Applications designating the United States:

PCT/US03/07377	March 7, 2003	Pending
Application Number	Filing Date	Status

This application claims the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below:

Provisional Application(s):

60/362,883	March 8, 2002	Expired
Application Number	Filing Date	Status
60/380,711	May 14, 2002	Expired
Application Number	Filing Date	Status

E) METHOD OF PAYMENT OF FILING FEES FOR THIS APPLICATION:

Applicant claims small entity status 37 CFR §1.27

X A check in the amount of \$1,534.00

 X The Commissioner is hereby authorized to charge filing fees or credit any overpayment to Deposit Account Number 03-1721.

Basic Filing Fee (LARGE Entity)	\$750.00
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Additional Fees:

Total Number of Claims in excess of 20: $(48 - 20) = 28 \times \$18$	\$504.00
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Number of Independent Claims in excess of 3:(0) x \$42	\$.00
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Multiple Dependent Claims – YES	\$280	<u>\$280.00</u>
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Total Filing Fee: **\$1,534.00**

F) CORRESPONDENCE ADDRESS:



24280

X Customer Bar Code Label: 24280 PATENT TRADEMARK OFFICE

X Correspondence Address:

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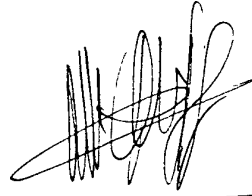
G) GOVERNMENT SUPPORT:

THE INVENTION WAS MADE BY AN AGENCY OF THE UNITED STATES GOVERNMENT OR UNDER A CONTRACT WITH AN AGENCY OF THE UNITED STATES GOVERNMENT:

X NO

____ YES, THE NAME OF THE U.S. GOVERNMENT AGENCY AND THE GOVERNMENT CONTRACT
NUMBER ARE :

Respectfully Submitted,



Nadège M. Lagneau, Ph.D.
Reg. No. 51,908

Dated: September 9, 2003

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